

320 EAST NEWEL AVENUE P.O. BOX 840490 HILDALE, UT 84784-0490 (435) 874-2323

APPLICATION FOR UTILITY SERVICE PROPANE / NATURAL GAS

Utility Department Use Only	
Account #	

Service can be obtained as lines are availab	le.		
Name: (Last, First, Initial)	Phone #		
(Last, First, Initial)			
Driver's License #	State	Email:	
Service Address:	City: Zip:		
Mailing Address:	City:	State: Zip:	
Requested Connect Date: / /	Gas Meter Size:	(If different from Regular 0-500 cf/hr @4 oz)	
Two relatives NOT LIVING WITH APPLICANT:			
Name:	Relationship:	Phone#() -	
Address:	City:	State Zip:	
Name:	Relationship:	Phone#() -	
Address:	City:	State: Zip:	
CHARGES AT SIGNING:	Γ	Utility Department Use Only:	
DEPOSIT\$		SO#	
GAS CONN FEE\$		RECEIVED BY:	
TOTAL DUE\$			
CONSUMER RESPONSIBILITY: The applicant agrees to pay monthly for services rendered and abide by propane/natural gas service regulations established by Hildale and/or Colorado City charges for service will be made at the established rates for the class of service applicable to the applicant. Should payment not be received, I will be responsible for all attorney's fees, court costs, filing fees, including charges or commissions that may be assessed to me by any collection agency retained to pursue collection of the balance owing, which may be as much as 50% of the principle balance owing. I further agree to pay interest at the rate of 1.5 % per month (18%APR) pre and post judgment. I also agree to maintain and keep safe, all pipeline facilities that are beyond the city meter.			
*NOTE: The customer will be charged the total locations that have a municipal propane tank).	l cost of the propane	already in the tank on their first bill (applicable only to	
Applicant Initial			
Applicant Name:		Date:	